



KENTUCKY BOARD OF NURSING

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ADVISORY OPINION STATEMENT

ROLES OF NURSES IN THE SUPERVISION AND DELEGATION OF NURSING TASKS TO UNLICENSED PERSONNEL

The Kentucky Board of Nursing is authorized by Kentucky Revised Statutes (KRS) Chapter 314 to regulate nurses, nursing education and practice, promulgate regulations and to issue advisory opinions on nursing practice, in order to assure that safe and effective nursing care is provided by nurses to the citizens of the Commonwealth.

The Kentucky Board of Nursing issues advisory opinions as to what constitutes safe nursing practice. As such, an opinion is not a regulation of the Board and does not have the force and effect of law. It is issued as a guideline to licensees who wish to engage in safe nursing practice.

Opinion:

Roles of Nurses in the Supervision and Delegation of
Nursing Tasks to Unlicensed Personnel

Approved Date: 6/87

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Reviewed: 1/2012; 9/2012; 4/2014

Accountability and Responsibility of Nurses

In accordance with KRS 314.021(2), nurses are responsible and accountable for making decisions that are based upon the individuals' educational preparation and current clinical competence in nursing, and requires licensees to practice nursing with reasonable skill and safety. Nursing practice should be consistent with the *Kentucky Nursing Laws*, established standards of practice, and be evidence based.

Rationale for Advisory Opinion

The Board has received numerous inquiries related to the role of nurses in delegation. These inquiries span healthcare settings including facility, school, community and others. The Board has issued the following advisory opinion statement as a resource for nurses making delegation decisions.

Advisory Opinion

In accordance with KRS 314.021(2), nurses are held responsible and accountable for their decisions regarding the supervision and delegation of nursing acts to unlicensed personnel who provide nursing assistance, based upon the nurse's educational preparation and current clinical competence in nursing.

Exceptions To This Opinion

Performing nursing tasks, such as medication administration, without a nursing license, except when within the scope of practice of another licensed healthcare professional or otherwise permitted by law, would constitute the unlawful practice of nursing (KRS 314.031 and KRS 314.991). There is, however, one significant exception.

Pursuant to 201 KAR 20:400, Section 1(10), when the performance of what would otherwise constitute a nursing task is directed by the client, the client's family, the client's legal guardian or the client/client family/legal guardian's delegatee¹, the task is not considered to be the practice of nursing. This would occur primarily in venues that are the client's home, or home-like residential settings, whether temporary or permanent.

Patient and family² education is a part of nursing practice. As a part of preparing a patient for self-care, nurses may teach and supervise the performance of acts by patients and family members who have demonstrated willingness and an ability to perform the acts.

Nurse as Educator of Unlicensed Personnel

A registered nurse is an appropriate licensed health care professional to participate in the instruction, training, and education of unlicensed personnel. The licensed practical nurse may participate in the instruction, training and education of unlicensed personnel under the direction of a registered nurse, physician, dentist, or advanced practice registered nurse (except as limited in KRS 156.502 for licensed practical nurses in school settings).

Delegation does not occur when:

- A nurse only participates in the education of the unlicensed person and is not a participant in the ongoing assessment and implementation of direct care for the client and is not making decisions about delegation pursuant to 201 KAR 20:400 at the time the unlicensed person is providing the care; or
- During non-routine encounters between the nurse and client if the nurse is not making decisions about delegation pursuant to 201 KAR 20:400; or
- During performance of administrative duties by the nurse in the care setting that are not related to the nurse providing or supervising direct care.

¹ In this instance client/client's family/ legal guardian delegatee is a person who has been designated to provide care for the client by the client, clients family or legal guardian. This may be in a private home setting or in a more structured home-like environment.

² "Family" is defined by the client.

Registered Nurse

Based upon the statutes governing registered nursing practice, the focus of registered nursing practice is on the application of substantial specialized knowledge, judgment and nursing skill in the assessment, planning, implementation and evaluation of nursing care. Therefore, the registered nurse is responsible and accountable for:

- a) Utilizing nursing judgment and critical thinking in decision-making regarding nursing care, and assuring that care is provided in a safe and competent manner;
- b) Utilizing 201 KAR 20:400 Delegation of nursing tasks in determining which nursing acts in the implementation of care can be delegated and to whom.

201 KAR 20:400 Section 2 states in part:

“(3) Prior to delegating a nursing act, the nurse shall determine the nursing care needs of the client. The nurse shall retain responsibility and accountability for the nursing care of the client, including nursing assessment, planning, evaluation, and assuring documentation.

(4) The nurse, prior to delegation to an unlicensed person, shall have either instructed the unlicensed person in the delegated act or determined that the unlicensed person is competent to perform the nursing task.

(5) A nursing task shall be delegated directly or indirectly. An indirect delegation shall not alter the responsibility of the nurse for appropriately assigning and supervising an unlicensed person.”

- c.) Providing supervision³ of unlicensed personnel who provide assistance to the nurse.

The nurse may wish to utilize the KBN Decision Tree for Delegation of Nursing Tasks to Unlicensed Personnel to determine if the nursing task should be delegated in conjunction with 201 KAR 20:400, Section 2 which states in part:

- A task that a reasonable and prudent nurse would find is within the scope of sound nursing judgment and practice to delegate;
- A task that in the opinion of the delegating nurse, can be competently and safely performed by the unlicensed person without compromising the client's welfare and safety;
- A task that shall not require the unlicensed person to exercise independent nursing judgment or intervention;
- A task that the nurse has assured is performed in a competent manner by the unlicensed person.

³“Supervision” as defined in 201 KAR 20:400 Section 1(9) means “the provision of guidance by a qualified nurse for the accomplishment of a nursing task with periodic observation and evaluation of the performance of the task including validation that the nursing task has been performed according to established standards of practice.”

Licensed Practical Nurse

The licensed practical nurse, practices under the direction of a registered nurse, advanced practice registered nurse, physician, or dentist, and may supervise and delegate nursing tasks to unlicensed persons in accordance with 201 KAR 20:400 as outlined in Section 1, except in a school setting. Under KRS 156:502 (2) a school employee may be delegated responsibility to perform a health service by a physician, advanced practice registered nurse or registered nurse. Thus in a school setting, a licensed practical nurse is not authorized to delegate to an unlicensed person.

Supervision

In a supervising capacity, the registered nurse, or licensed practical nurse practicing under the direction and supervision of a physician, APRN, or RN, should provide direction and assistance to those unlicensed individuals supervised, observe and monitor the activities of those supervised, and evaluate the effectiveness of tasks performed under supervision.

The nurse should assure that the individual performing the task has the necessary educational preparation and validation of competence in order to perform the act in a safe manner.

Tasks which require substantial specialized nursing knowledge, judgment and skill should be performed only by registered nurses.

Tasks which require nursing knowledge and skill in implementing a plan of care should not be delegated to an unlicensed person.

In the utilization of unlicensed personnel to provide nursing assistance, nurses should follow written approved policies and procedures of the health care facility/agency which are consistent with KRS Chapter 314.

It is inappropriate for an unlicensed person to delegate nursing tasks to other unlicensed persons.

Delegated Nursing Tasks⁴

Unlicensed personnel who provide assistance to nurses may contribute to the implementation of the plan of nursing care in situations where the delegation of the task does not jeopardize the client welfare. Tasks may be delegated only after a nursing assessment is made and in the nurse's judgment, it is the decision that the task is appropriate to delegate.

Such tasks may include, but are not limited to:

- a) Collection, documentation, and reporting of data (e.g., vital signs, oxygen saturation using pulse oximeter equipment, height, weight, intake and output, and blood glucose testing when sample is obtained from a capillary site).

⁴ Per 201 KAR 20:400, Section 1 (7) "nursing task" is defined as "an act included in the definition of registered nursing practice, advanced practice registered nursing, or licensed practical nursing practice..."

- b) Assisting patients to perform self-care tasks, including assistance with a patient's self-administered medication.
- c) Performing tasks of a routine nature that do not require ongoing nursing assessment and nursing judgment. For example, simple non-sterile dressing changes, external care to urinary catheters enema administration when not contraindicated by patient's skin integrity and condition, and colostomy appliance changes on mature stoma sites with sustained skin integrity.
- d) Selected ambulation, positioning, turning, activities of daily living, or exercise programs.
- e) Providing and maintaining a safe, comfortable environment.
- f) Selected nutritional activities, such as feeding and meal preparation. This may include the administration of feedings or medications as outlined below via a gastrostomy tube when the tube is in a mature stoma site with sustained skin integrity, and when it is delegated by and performed under the supervision of a nurse.
- g) Socialization activities.
- h) Transportation of client.

Medication Administration

As stated in KRS 314.011(6) (c) and (10)(c), the administration of medication is the practice of nursing. KRS 314.011(6) (c) concerning registered nursing practice states:

“The administration of medication and treatment as prescribed by a physician, physician assistant, dentist, or advanced registered nurse practitioner and as further authorized or limited by the board, and which are consistent either with American Nurses' Association Standards of Practice or with Standards of Practice established by nationally accepted organizations of registered nurses.

It is the opinion of the Board that following assessment of a client, a nurse utilizing 201 KAR 20:400 may delegate components of the administration of medication regardless of route.

Long Term Care

In Kentucky, 902 KAR 20:048 states that unlicensed personnel known as medication aides or similar titles, may function by administering oral and topical medication in long-term care facilities only through delegation by and under the supervision of a registered nurse or licensed practical nurse. Unlicensed personnel who function as medication aides must have successfully completed the state approved course for administration of medication as defined in the administrative regulations issued by the Cabinet for Health and Family Services, Office of the Inspector General.

School Setting

Unlicensed school personnel were given authority (2014) to administer insulin in school settings under the delegation of a physician, advanced practice registered nurse or registered nurse by KRS 158.838. Unlicensed assistive personnel are required to successfully complete an approved course for administration of insulin and validate competency.

Dialysis Technicians

Dialysis technicians may administer only those medications listed in 201 KAR 20:470, "Dialysis technician credentialing requirements and training program standards".

Decisions Related to Delegation

A registered nurse who makes decisions related to delegation of tasks is governed by 201 KAR 20:400 Delegation of nursing tasks. (An informational copy of the regulation may be downloaded from the KBN website at <http://www.lrc.state.ky.us/kar/201/020/400.htm>). In addition to this advisory opinion the Kentucky Board of Nursing has published the Decision Tree for Delegation to Unlicensed Assistive Personnel which provides guidance to the nurse in determining whether a selected act should be delegated (An informational copy of the decision tree may be downloaded from the KBN website at <http://kbn.ky.gov/practice/Documents/DecisionTreeforDelegationtoUAP.pdf>). In summary, delegation should occur only if, in the professional opinion of the delegating nurse, the act may be competently and safely performed by the person to whom the act is delegated.

Determining Scope of Practice

KRS 314.021(2) holds all nurses individually responsible and accountable for the individual's acts based upon the nurse's education and experience. Each nurse must exercise professional and prudent judgment in determining whether the performance of a given act is within the scope of practice for which the nurse is both licensed and clinically competent to perform. In addition to this advisory opinion statement, the Kentucky Board of Nursing has published "Scope of Practice Determination Guidelines" which contains a decision tree chart providing guidance to nurses in determining whether a selected act is within an individual nurse's scope of practice now or in the future. A copy of the guidelines may be downloaded from the Board's website <http://kbn.ky.gov/practice/Documents/ScopeDeterminGuidelines.pdf>.

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Applicable Statutes From the Kentucky Nursing Laws⁵

KRS 314.011(2) defines "delegation" as:

...Directing a competent person to perform a selected nursing activity or task in a selected situation under the nurse's supervision and pursuant to administrative regulations promulgated by the board in accordance with the provisions of KRS Chapter 13A.

201 KAR 20:400 governs delegation of nursing tasks to unlicensed persons as well as to paramedics in a hospital emergency department.

KRS 314.031(1) states: "It shall be unlawful for any person to call or hold himself out as or use the title of nurse or to practice or offer to practice as a nurse unless licensed under the provisions of this chapter."

KRS 314.011(6) defines "registered nursing practice" as:

...The performance of acts requiring substantial specialized knowledge, judgment, and nursing skill based upon the principles of psychological, biological, physical, and social sciences in the application of the nursing process in:

- a) The care, counsel, and health teaching of the ill, injured or infirm;
- b) The maintenance of health or prevention of illness of others;
- c) The administration of medication and treatment as prescribed by physician, physician assistant, dentist, or advanced practice registered nurse and as further authorized or limited by the board, and which are consistent, either with American Nurses' Association Standards of Practice or with Standards of Practice established by nationally accepted organizations of registered nurses. Components of medication administration include, but are not limited to:
 - 1. Preparing and giving medication in the prescribed dosage, route, and frequency, including dispensing medications only as defined in subsection (17)(b) of this section;
 - 2. Observing, recording, and reporting desired effects, untoward reactions, and side effects of drug therapy;
 - 3. Intervening when emergency care is required as a result of drug therapy;
 - 4. Recognizing accepted prescribing limits and reporting deviations to the prescribing individual;
 - 5. Recognizing drug incompatibilities and reporting interactions or potential interactions to the prescribing individual; and
 - 6. Instructing an individual regarding medications;
- d) The supervision, teaching of, and delegation to other personnel in the performance of activities relating to nursing care; and
- e) The performance of other nursing acts which are authorized or limited by the board, and which are consistent either with American Nurses' Association Standards of Practice or with Standards of Practice established by nationally accepted organizations of registered nurses.

⁵ A copy of the *Kentucky Nursing Laws* may be downloaded from the Kentucky Board of Nursing website at <http://kbn.ky.gov>.

KRS 314.011(10) defines "licensed practical nursing practice" as:

...The performance of acts requiring knowledge and skill such as are taught or acquired in approved schools for practical nursing in:

- a) The observing and caring for the ill, injured, or infirm under the direction of a registered nurse, a licensed physician, or dentist;
- b) The giving of counsel and applying procedures to safeguard life and health, as defined and authorized by the board;
- c) The administration of medication or treatment as authorized by a physician, physician assistant, dentist, or advanced practice registered nurse and as further authorized or limited by the board which is consistent with the National Federation of Licensed Practical Nurses or with Standards of Practice established by nationally accepted organizations of licensed practical nurses;
- d) Teaching, supervising, and delegating except as limited by the board; and
- e) The performance of other nursing acts, which are authorized, or limited by the board and which are consistent with the National Federation of Licensed Practical Nurses' Standards of Practice or with Standards of Practice established by nationally accepted organizations of licensed practical nurses.

KRS 314.011(8) defines "advanced practice registered nursing practice" as:

"Advanced practice registered nursing" means the performance of additional acts by registered nurses who have gained added knowledge and skills through an approved organized postbasic program of study and clinical experience; who are certified by the American Nurses' Association or other nationally established organizations or agencies recognized by the board to certify registered nurses for advanced practice registered nursing as a certified nurse practitioner, certified nurse anesthetist, certified nurse midwife, or clinical nurse specialist; and who certified in at least one (1) population focus. The additional acts shall, subject to approval of the board, include but not be limited to prescribing treatment, drugs, devices, and ordering diagnostic tests...

KRS 314.011 (3) defines "nurse" as:

"Nurse" means a person who is licensed or holds the privilege to practice under the provisions of this chapter as a registered nurse or as a licensed practical nurse.

Accountability and Responsibility of Nurses

KRS 314.021(2) imposes individual responsibility and holds nurses accountable for rendering safe, effective nursing care to clients and for judgments exercised and actions taken in the course of providing care. Acts which are within the permissible scope of practice for a given licensure level may be performed only by those licensees who personally possess the education and skill proficiency to perform those acts in a safe, effective manner.

Nursing practice should be consistent with the *Kentucky Nursing Laws (KRS Chapter 314)*, established standards of practice, and be evidence based.

Attachments:

201 KAR 20:400

KBN Decision Tree for Delegation to Unlicensed Personnel

KBN Scope of Practice Determination Guidelines

201 KAR 20:400. Delegation of nursing tasks.

RELATES TO: KRS 311A.170, 314.011, 314.021(2), 314.091(1)

STATUTORY AUTHORITY: KRS 314.131(1)

NECESSITY, FUNCTION, AND CONFORMITY: KRS 314.131(1) authorizes the board to promulgate administrative regulations necessary to implement KRS Chapter 314. KRS 314.091(1)(d) prohibits a person from negligently or willfully acting in a manner inconsistent with the practice of nursing. This administrative regulation establishes requirements that govern the delegation of a nursing task in a safe, effective manner so as to safeguard the health and welfare of the citizens of the Commonwealth.

Section 1. Definitions. (1) "Board" is defined in KRS 314.011(1).

(2) "Client" means a patient, resident or consumer of nursing care.

(3) "Competence" means performing an act in a safe, effective manner.

(4) "Delegatee" means a person to whom a task is delegated.

(5) "Delegator" means the nurse delegating a task to another person.

(6) "Nurse" is defined in KRS 314.011(3).

(7) "Nursing task" means an act included in the definition of registered nursing practice, advanced practice registered nursing, or licensed practical nursing practice pursuant to KRS 314.011(6), (8), or (10).

(8) "Paramedic" is defined in KRS 311A.010.

(9) "Supervision" means the provision of guidance by a qualified nurse for the accomplishment of a nursing task with periodic observation and evaluation of the performance of the task including validation that the nursing task has been performed according to established standards of practice.

(10) "Unlicensed person" means an individual, other than a nurse, the client, or the client's family, legal guardian, or delegatee, who functions in an assistant or subordinate role to the nurse.

Section 2. Nurse's Responsibility in Delegation. (1) A registered nurse or a licensed practical nurse may delegate a task to an unlicensed person in accordance with this section and Sections 3 and 4 of this administrative regulation.

(2) A registered nurse may delegate a task to a paramedic employed in a hospital emergency department in accordance with KRS 311A.170 and Sections 3 and 4 of this administrative regulation.

(3) Prior to delegating a nursing task, the nurse shall determine the nursing care needs of the client. The nurse shall retain responsibility and accountability for the nursing care of the client, including nursing assessment, planning, evaluation and assuring documentation.

(4) The nurse, prior to delegation to an unlicensed person, shall have either instructed the unlicensed person in the delegated task or determined that the unlicensed person is competent to perform the nursing task.

(5) A nursing task shall be delegated directly or indirectly. An indirect delegation shall not alter the responsibility of the nurse for appropriately assigning and supervising an unlicensed person.

(6) A nurse who delegates a nursing task in violation of this administrative regulation or participates in the utilization of an unlicensed person in violation of this administrative regulation shall be considered acting in a manner inconsistent with the practice of nursing.

Section 3. Criteria for Delegation. The delegation of a nursing task shall meet the following criteria:

(1) The delegated nursing task shall be a task that a reasonable and prudent nurse would find is within the scope of sound nursing judgment and practice to delegate.

(2) The delegated nursing task shall be a task that, in the opinion of the delegating nurse, can be competently and safely performed by the delegatee without compromising the client's welfare.

(3) The nursing task shall not require the delegatee to exercise independent nursing judgment or intervention.

(4) The delegator shall be responsible for assuring that the delegated task is performed in a competent manner by the delegatee.

Section 4. Supervision. (1) The nurse shall provide supervision of a delegated nursing task.

(2) The degree of supervision required shall be determined by the delegator after an evaluation of appropriate factors involved including the following:

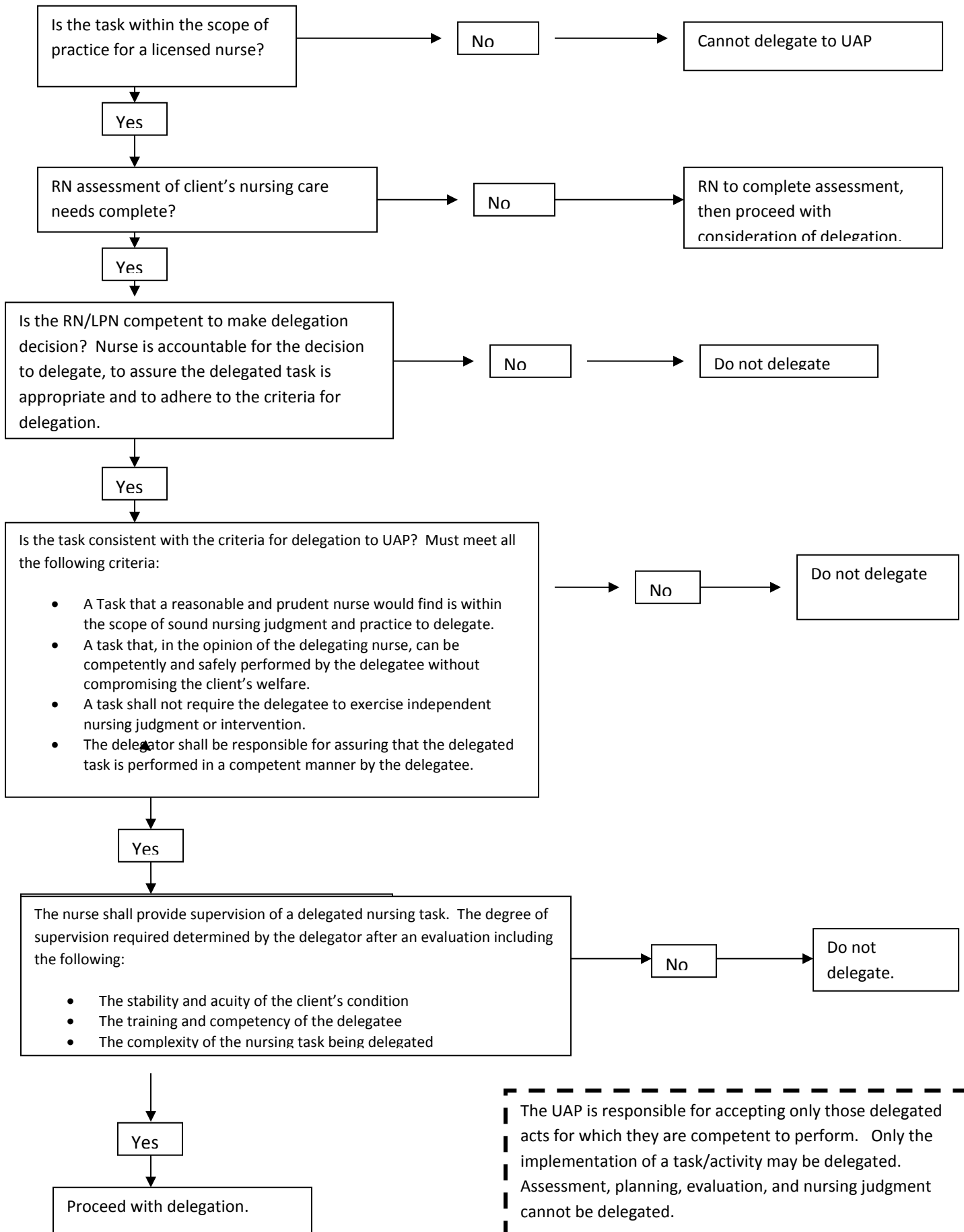
(a) The stability and acuity of the client's condition;

(b) The training and competency of the delegatee;

(c) The complexity of the nursing task being delegated; and

(d) The proximity and availability of the delegator to the delegatee when the nursing task is performed. (19 Ky.R. 1242; eff. 1-27-93; Am. 25 Ky.R. 2189; 2546; eff. 5-19-99; 29 Ky.R. 2947; eff. 8-13-03; TAm eff. 7-15-2010.)

KBN DECISION TREE FOR DELEGATION TO UNLICENSED ASSISTIVE PERSONNEL (UAP)



The UAP is responsible for accepting only those delegated acts for which they are competent to perform. Only the implementation of a task/activity may be delegated. Assessment, planning, evaluation, and nursing judgment cannot be delegated.

SCOPE OF PRACTICE DETERMINATION GUIDELINES

The *Kentucky Nursing Laws* (KRS Chapter 314) defines “licensed practical nursing practice,” “registered nursing practice,” “advanced practice registered nursing practice,” and holds all nurses individually accountable and responsible for their nursing decisions and actions. The Kentucky Board of Nursing (KBN) interprets the statutes governing nursing practice and issues advisory opinions¹ as guidelines on what constitutes safe nursing practice.

When the performance of a specific act is not definitively addressed in the *Kentucky Nursing Laws* or in an advisory opinion of the Board, the nurse must exercise professional judgment in determining whether the performance of the act is within the scope of practice for which the nurse is licensed. The KBN has developed a decision tree chart that provides guidelines to nurses in determining whether a selected function is within a nurse’s scope of practice now or in the future.

Statutory Definitions and Policy

KRS 314.011(10) defines “licensed practical nursing practice” as:

...The performance of acts requiring knowledge and skill such as are taught or acquired in approved schools for practical nursing in:

- a) The observing and caring for the ill, injured, or infirm under the direction of a registered nurse, a licensed physician, or dentist.
- b) The giving of counsel and applying procedures to safeguard life and health, as defined and authorized by the board.
- c) The administration of medication or treatment as authorized by a physician, physician assistant, dentist, or advanced practice registered nurse and as further authorized or limited by the board which is consistent with the National Federation of Licensed Practical Nurses or with standards of practice established by nationally accepted organizations of licensed practical nurses.
- d) Teaching, supervising, and delegating except as limited by the board.
- e) The performance of other nursing acts which are authorized or limited by the board and which are consistent with the National Federation of Licensed Practical Nurses’ Standards of Practice or with standards of practice established by nationally accepted organizations of licensed practical nurses.

KRS 314.011(6) defines “registered nursing practice” as:

...The performance of acts requiring substantial specialized knowledge, judgment and nursing skill based upon the principles of psychological, biological, physical and social sciences in the application of the nursing process in:

- a) The care, counsel, and health teaching of the ill, injured, or infirm.
- b) The maintenance of health or prevention of illness of others.
- c) The administration of medication and treatment as prescribed by a physician, physician assistant, dentist, or advanced practice registered nurse and as further authorized or limited by the board, and which are consistent either with the American Nurses’ Association Standards of Practice or with standards of practice established by nationally accepted organizations of registered nurses. Components of medication administration include, but are not limited to:
 1. Preparing and giving medication in the prescribed dosage, route, and frequency;
 2. Observing, recording, and reporting desired effects, untoward reactions, and side effects of drug therapy;
 3. Intervening when emergency care is required as a result of drug therapy;
 4. Recognizing accepted prescribing limits and reporting deviations to the prescribing individual;
 5. Recognizing drug incompatibilities and reporting interactions or potential interactions to the prescribing individual; and
 6. Instructing an individual regarding medications.
- d) The supervision, teaching of, and delegation to other personnel in the performance of activities relating to nursing care.
- e) The performance of other nursing acts which are authorized or limited by the board, and which are consistent either with American Nurses’ Association Standards of Practice or with standards of practice established by nationally accepted organizations of registered nurses.

KRS 314.011(8) defines “advanced practice registered nursing” (APRN) as:

...The performance of additional acts by registered nurses who have gained added knowledge and skills through an organized post-basic program of study and clinical experience and who are certified by the American Nurses’ Association or other nationally established organizations or agencies recognized by the board to certify registered nurses for advanced nursing practice. The performance of these additional acts shall be consistent with the certifying organization or agencies’ scopes and standards of practice recognized by the board by regulations.

KRS 314.021(2) states that:

All individuals licensed under provisions of this chapter shall be responsible and accountable for making decisions that are based upon the individuals’ educational preparation and experience in nursing and shall practice nursing with reasonable skill and safety.

DECISION TREE/GUIDELINES FOR DETERMINING SCOPE OF PRACTICE

1. Describe the act being performed.



2. Is the act expressly permitted/prohibited by the *Kentucky Nursing Laws* for license which you hold?

Permitted



Yes

No



Stop



Go to 5

Unsure



Prohibited ⇒ Stop

3. Does the act require application of substantial specialized nursing knowledge, skill, and independent judgment?

Yes



WITHIN SCOPE OF RN OR APRN, OR MAYBE²
APRN PRACTICE ONLY



No



MAY BE WITHIN SCOPE OF RN OR LPN PRACTICE



4. Is the act consistent with the scope of practice based upon at least one of the following factors?

- National nursing organizations' standards of practice.
- Nursing literature and research.
- Appropriately established policy and procedure of employing facility.

Yes



No ⇒ NOT WITHIN YOUR SCOPE OF PRACTICE

5. Do you personally possess the depth and breadth of knowledge to perform the act safely and effectively as demonstrated by knowledge acquired in a prelicensure program, post-basic program, or continuing education program?

Yes



No ⇒ NOT WITHIN YOUR SCOPE OF PRACTICE

6. Do you personally possess current clinical competence to perform the act safely?

Yes



**No ⇒ NOT WITHIN YOUR CURRENT SCOPE OF PRACTICE
UNLESS COMPETENCE IS ACHIEVED**

7. Is the performance of the act within the accepted "standard of care" which would be provided in similar circumstances by reasonable and prudent nurses who have similar training and experience?

Yes



Unsure



Contact KBN

**No ⇒ NOT WITHIN YOUR SCOPE OF PRACTICE:
PERFORMANCE OF ACT MAY PLACE BOTH NURSE
AND PATIENT AT RISK**

8. Are you prepared to accept the consequences of your action?

Yes



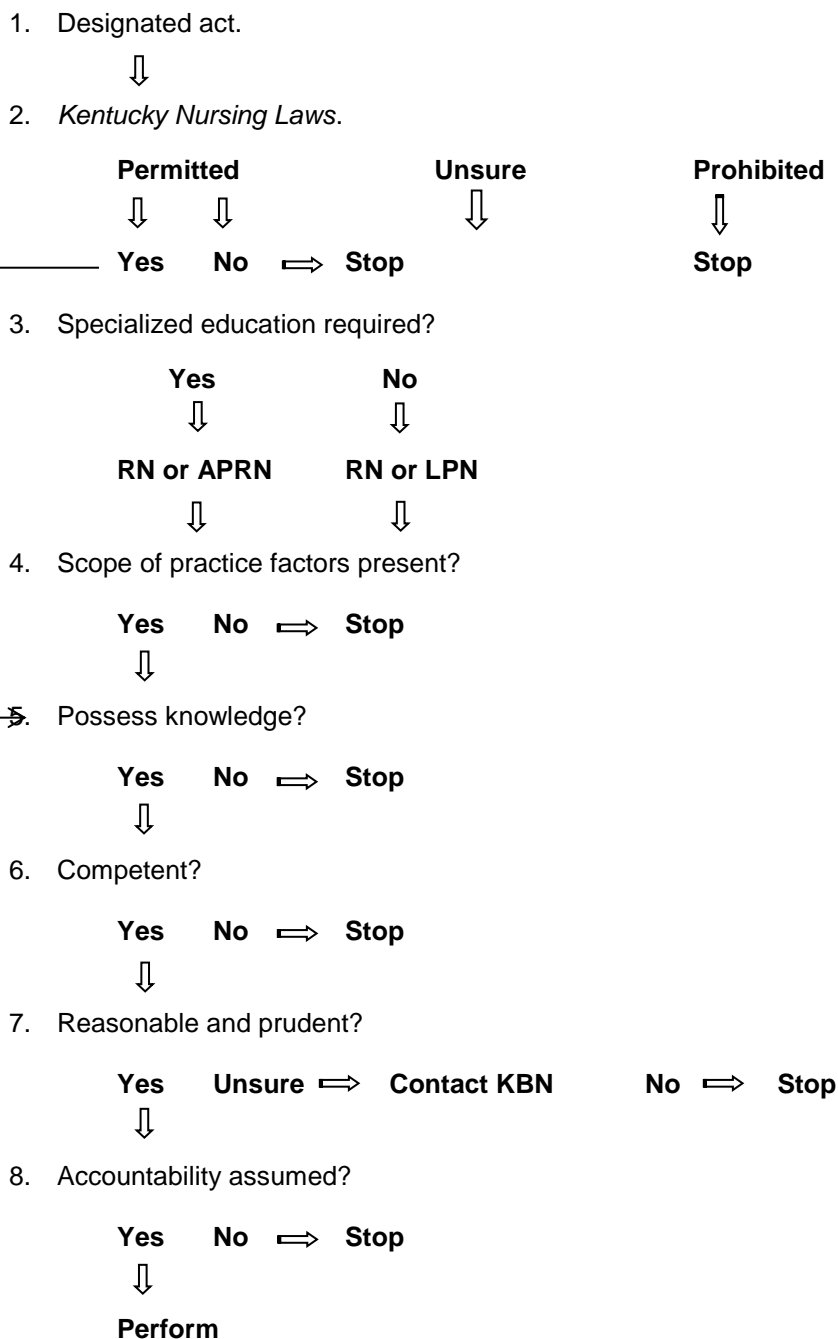
PERFORM THE ACT – BASED UPON VALID ORDER WHEN
NECESSARY, AND IN ACCORDANCE WITH APPROPRIATELY
ESTABLISHED INSTITUTIONAL POLICY AND PROCEDURE



ASSUME ACCOUNTABILITY FOR PROVISION OF SAFE CARE

**No ⇒ THE ACCOUNTABILITY THAT IS REQUIRED BY KRS
314.021(2) IS NOT ASSUMED**
↓
NOT WITHIN YOUR SCOPE OF PRACTICE
↓
NOTIFY APPROPRIATE PERSON(S)

GUIDELINES SUMMARY: DETERMINING SCOPE OF PRACTICE



- 1 An advisory opinion is not a regulation of the Board and does not have the force and effect of law. It is issued as a guidepost to licensees who wish to engage in safe nursing practice and who wish to minimize the possibility of being subjected to malpractice litigation. (Copies of advisory opinion statements and the *Kentucky Nursing Laws* are available for purchase from the Kentucky Board of Nursing office.)
- 2 The legal scope of advanced practice registered nursing is defined by a) post-basic education; b) certification as an advanced practiced nurse; and c) the national nursing organization's published scope and standards of practice.

Approved: 2/88

Revised: 8/90; 2/91; 10/92; 6/00; 9/01; 4/05; 4/2014

Reviewed: 05/07; 5/09 Editorial Revision: 1/2011